Fill in this Information to identify	the case:
Debtor 1 Plein Enterp	rises, Inc.
First Name	Middle Name Last Name
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name
United States Bankruptcy Court	for the: District of Arizona
Case Number: 10-24919-PHX-GBN	
10 240 104 11/20	25/1
Form 1340 (12/19)	
APPLICATION FOR PAY	MENT OF UNCLAIMED FUNDS
1. Claim Information	
	s) ¹ named below, application is made for the payment of unclaimed funds on deposit with that any other party may be entitled to these funds, and I am not aware of any dispute
regarding these funds.	that any other party may be entitled to these failus, and rain not aware or any dispute
Note: If there are joint Claiment	a complete the fields below for both Claimants
Note. If there are joint Claimant	s, complete the fields below for both Claimants.
Amount:	\$1,172.39
Claimant's Name:	Dilks & Knopik, LLC
Claimant's Current Mailing	35308 SE Center St
Address, Telephone Number,	Snoqualmie, WA 98065
and Email Address:	(425) 836-5728 admin@dilksknopik.com
	admin@dikskriopik.com
2. Applicant Information	
Applicant ² represents that Claim apply):	nant is entitled to receive the unclaimed funds because (check the statements that
Applicant is the Claimant	and is the Owner of Record ³ entitled to the unclaimed funds appearing on the records of the
court.	
Applicant is the Claimant succession or by other mea	and is entitled to the unclaimed funds by assignment, purchase, merger, acquisition, ans.
Applicant is Claimant's representative (e.g., attorney or unclaimed funds locator).	
Applicant is a representative of the deceased Claimant's estate.	
3. Supporting Documentation	
Applicant has read the cousupporting documentation	urt's instructions for filing an Application for Unclaimed Funds and is providing the required with this application.

The Claimant is the party entitled to the unclaimed funds.

The Applicant 2110elplar249169tBk4plplicatoo.11545AppFited ant/02/22ant Entered 4362/22 09:30:39

The Owner of Record is the original payee. Main Document Page 1 of 4 Desc

S:
ited States Attorney of Arizona sance Square Ave., Suite 1800 x, AZ 85004
5. Co-Applicant Declaration (if applicable) Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Date:
Signature of Co-Applicant (if applicable) Printed Name of Co-Applicant (if applicable) Address:
Telephone:
6. Notarization STATE OF

Applicant has sent a copy of this application and supporting documentation to the United States Attorney,

4. Notice to United States Attorney

 \times

CERTIFICATE OF SERVICE

In accordance with 28 U.S.C. § 2042, the undersigned hereby certifies that on the date designated below, a true and correct copy of the foregoing application with all required documentation was mailed to:

United States Attorney for District of Arizona 2 Renaissance Square 40 N. Central Ave., Suite 1800 Phoenix, AZ 85004

Names and addresses of all other parties served:

Date: October 31, 2022

Andrew T. Drake - Vice President

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Dilks & Knopik, LLC 35308 SE Center Street Snoqualmie, WA 98065

Main Document

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Explanation of Supporting Documentation for **Application for Payment of Unclaimed Funds**

The claimant did not receive the dividend check in the above case for the following reason:

Dividends were not collected by the creditor, Eric Gray.

Eric Gray has assigned the unclaimed funds and his claim to Dilks & Knopik LLC. A Transfer of Claim was filed on 10/31/2022 (Docket # 1514).

Date: October 31, 2022

Andrew T. Drake - Vice President

Dilks & Knopik, LLC 35308 SE Center Street Snoqualmie, WA 98065